

Phase 4: National Nursing Home Testing & Final Revisions

National Validation and Performance Testing

The national validation and evaluation of the minimum data set, version 3.0 (MDS 3.0) includes approximately 70 community nursing homes and 2800 residents, regionally distributed throughout the United States. The Veterans Administration (VA) sample includes 20 nursing homes (NHs) regionally distributed. The community nursing home sample aims to include hospital based and free standing facilities and for-profit and not-for-profit facilities in proportions similar to those currently found in the United States. The Colorado Foundation for Medical Care (CFMC) identifies 8 quality improvement organizations (QIOs) throughout the United States to participate. The 8 States participating include New Jersey, Pennsylvania, Georgia, North Carolina, Colorado, Illinois, California and Texas. The QIOs, in turn, identify data collection staff and recruit the community NHs involved in the national evaluation.

National training of gold standard nurses on new MDS items and instructions occurred July 24 - 28, 2006. These same nurses are trained on the validation protocols and sampling design in a follow-up national training. This follow-up training includes additional review of MDS items. These gold standard nurses return to their own states where they train the MDS data collectors from the local nursing facilities on the new MDS form.

The evaluation team plans to capture a representative sample of short and long stay residents and to employ algorithms to ensure that the sample includes admission, quarterly & annual evaluations. Testing and analyses will address inter-rater reliability for facility and research staff, validity of key sections, and time needed to complete the MDS. The field test begins August 2006. The analysis of these data is scheduled for early 2007.

Impact Analysis

The evaluation includes an assessment of the impact of redesigned MDS items on Centers for Medicare & Medicaid Services (CMS) that are dependent on Version 2.0 of the MDS. A component of the analysis examines how revised reliable and valid MDS 3.0 items potentially impact quality measures and resource utilization group (RUGs) payment items.

Phase 5: Final Revisions to MDS 3.0

Consolidate and Summarize Feedback from National Validation

The research team maintains a database of questions and responses throughout the data collection period. CFMC initiates regular contacts and elicit feedback throughout the national evaluation. The research team also obtains structured

feedback from the facility staff who participate in the national validation activity at the conclusion of the national testing. The feedback will be combined with the analytic work above and discussed with CMS leadership, VA leadership and content experts. This feedback is used to make final changes to the proposed MDS, the instructions and will be summarized as a section in the final report.

In those instances where the proposed MDS 3.0 item performance is no better than the MDS 2.0 item, we plan to recommend retaining the MDS 2.0 item with which facilities have pre-existing experience and training. Other recommendations will be discussed before final revisions are made.

Town Hall Meeting

A revised MDS and instructions will be made publicly available. A Town Hall meeting will be scheduled by CMS to provide information about the national study results and revisions to stakeholders. *[Date Pending]*